

ECS/EMD Configuration Change Request

Page 1 of

Page(s)

1. Originator Maryellen Corbett	2. Log Date: 2/5/04	3. CCR #: 04-0089	4. Rev: —	5. Tel: 301 925-0703	6. Rm #:	7. Org. COTS
8. CCR Title: Revision 1 of EMD COTS Deployment Plan Volume 1						
9. Originator Signature/Date Maryellen Corbett /s/ 2/03/04			10. Class II	11. Type: CCR	12. Need Date: 02/01/2004	
13. CCR Sponsor Signature/Date Pamela Johnson /s/ 2/04/04			14. Category of Change: Update ECS/EMD Baseline Doc		15. Priority: (If "Emergency" fill in Block 27). Routine	
16. Documentation/Drawings Impacted (Review and submit checklist): 335-EMD-001, Revision 1			17. Schedule Impact:		18. CI(s) Affected:	
19. Release Affected by this Change: EMD		20. Date due to Customer:		21. Estimated Cost: None - Under 100K		
22. Source Reference: <input type="checkbox"/> NCR (attach) <input type="checkbox"/> Action Item <input type="checkbox"/> Tech Ref. <input type="checkbox"/> GSFC <input type="checkbox"/> Other:						
23. Problem: (use additional Sheets if necessary) DID 335, EMD COTS Deployment Plan, Volume 1 was published in December 2003. Recently comments were received from the Government. Updates to 3 sections were requested. Two updates involved items that have substantially changed since the original publication. The third was an update of the NCR section for the Remedy 5.1.2 upgrade. No NCRs were identified as outstanding for Remedy in the original publication. Two NCRs will be identified in the revised document.						
24. Proposed Solution: (use additional sheets if necessary) Update and deliver a revised edition of the original EMD DID 335 COTS Deployment Plan. Updated pages are attached with change bars are included as attached pages for reference. The revised document will not include change bars.						
25. Alternate Solution: (use additional sheets if necessary) Leave document in current state						
26. Consequences if Change(s) are not approved: (use additional sheets if necessary) The EMD DID 335 COTS will not accurately current COTS deployment plans.						
27. Justification for Emergency (If Block 15 is "Emergency"):						
28. Site(s) Affected: <input checked="" type="checkbox"/> EDF <input type="checkbox"/> PVC <input type="checkbox"/> VATC <input type="checkbox"/> EDC <input type="checkbox"/> GSFC <input type="checkbox"/> LaRC <input type="checkbox"/> NSIDC <input type="checkbox"/> SMC <input type="checkbox"/> AK <input type="checkbox"/> JPL <input type="checkbox"/> EOC <input type="checkbox"/> IDG Test Cell <input type="checkbox"/> Other						
29. Board Comments:			30. Work Assigned To:		31. CCR Closed Date:	
32. SCDV CCB Chair (Sign/Date): Byron V. Peters /s/ 2/6/04			Disposition: Approved App/Com. Disapproved Withdraw Fwd/ESDIS ERB Fwd/ECS			
33. EDF CCB Chair (Sign/Date):			Disposition: Approved App/Com. Disapproved Withdraw Fwd/ESDIS ERB Fwd/ECS			
34. ECS CCB Chair (Sign/Date):			Disposition: Approved App/Com. Disapproved Withdraw Fwd/ESDIS ERB Fwd/ESDIS			